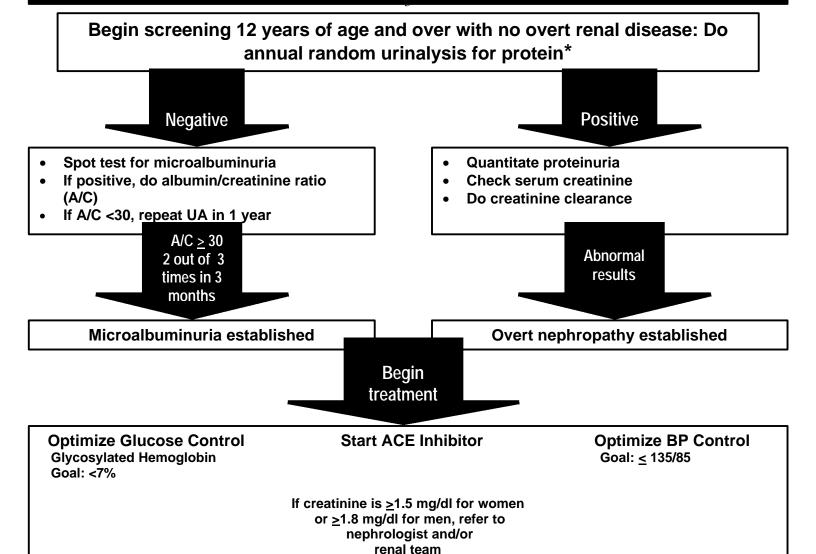
## SCREENING & INITIAL MANAGEMENT OF DIABETIC MICROALBUMINURIA AND NEPHROPATHY



\*The following conditions may result in false positive proteinuria or microalbuminuria: exercise within 24 hours, infection, fever, congestive heart failure, marked hyperglycemia, and marked hypertension. If any of these conditions are present, repeat the urinalysis for protein or microalbuminuria after the condition has resolved; then proceed with the algorithm according to the results of the repeated test.

To be used in conjunction with the Basic Guidelines for Diabetes Care, developed by the DCC and DCP, 1999.
Available by fax (916) 324-7764 or phone (916) 445-2547.

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Biochemical Index Normal Goal Action Suggested

Fasting/preprandial glucose <110 mg/dl 80 to 120 mg/dl <80 or>140 mg/dl
Bedtime glucose <120 mg/dl 100 to 140 mg/dl <100 or>160 mg/dl
Glycosylated hemoglobin <6% <7% >8%

\*\*These values are for nonpregnant adults. "Goals" and "Action Suggested" depend on individual patient circumstances. Such actions may include enhanced diabetes self-management education, comanagement with a diabetes team, referral to an endocrinologist, change in pharmacological therapy, initiation or increased SMBG, or more frequent contact with the patient. HbA1c is referenced to a nondiabetic range of 4.0-6.0% (mean 5.0%, SD±0.5%).

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